

District I
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Phone: (575) 393-6161 Fax: (575) 393-0720

HOBBS OCD

SEP 14 2016

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <u>Vanbuard</u>	API Number <u>30-025-10402</u>
Property Name <u>H506</u>	Well No. <u>#1</u>

Surface Location

UL - Lot <u>I</u>	Section <u>22</u>	Township <u>22 S</u>	Range <u>37 E</u>	Feet from <u>2194</u>	N/S Line <u>3</u>	Feet From <u>479</u>	E/W Line <u>2</u>	County <u>Lea</u>
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Well Status

TA'D WELL <u>YES</u>	<u>NO</u>	SHUT-IN <u>YES</u>	<u>NO</u>	INJ <u>NO</u>	INJECTOR <u>NO</u>	SWD <u>NO</u>	PRODUCER <u>OIL</u>	GAS <u>NO</u>	DATE <u>9/13/16</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>20</u>	<u>N/A</u>	<u>N/A</u>	<u>35</u>	<u>80</u>
Flow Characteristics					
Puff	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 <u>---</u>
Steady Flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR <u>---</u>
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS <u>---</u>
Down to nothing	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Type of Fluid
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Injected for
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Waterflood if
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature:		OIL CONSERVATION DIVISION
Printed name:	<u>J.T.</u>	Entered into RBDMS
Title:	<u>[Signature]</u>	Re-test
E-mail Address:		
Date:	Phone:	
	Witness:	